Creating Lasting Family Connections

Brief Description | Recognition | Program IOM | Intervention Type | Content Focus Interventions by Domain | Key Program Approaches | Outcomes | Evaluation Design Delivery Specifications | Intended Setting | Fidelity | Barriers and Problems | Personnel Education | Personnel Training | Cost | Intended Age Group | Intended Population Gender Focus | Replications | Adaptations | Contact Information

Program developers or their agents provided the Model Program information below.

BRIEF DESCRIPTION

Creating Lasting Family Connections (CLFC) is a comprehensive, family strengthening, substance abuse and violence prevention curriculum serving an intended population of high-risk children 9 to 17 years of age and their families. It is a 15- to 18-session program, modular in design, with optional delivery strategies. It requires careful steps to define and mobilize an appropriate community.

PROGRAM BACKGROUND

CLFC is the national dissemination model based on the results of Creating Lasting Connections (CLC), a 5-year research demonstration project funded by the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention. The project was designed as an ecumenical, community-based program focused on increasing community, family, and individual youth protective factors that would delay the onset and reduce the frequency of substance use. The program was delivered to at-risk 11- to 15-year-old youth through the implementation of a preexisting and privately developed prototype version of CLFC. The external evaluation of the CLC program showed that the program increased key resiliency factors and (through moderating effects) delayed the onset of substance use and reduced the amount of use.

RECOGNITION

Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services: Model Program

Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice: Model Program

U.S. Department of Education: Promising Program

White House Office of National Drug Control Policy: Special Recognition Award

International Youth Foundation Youth-Net: Model Program, selected for worldwide replication



INSTITUTE OF MEDICINE CLASSIFICATION (IOM)

UNIVERSAL, SELECTIVE, INDICATED

This program targets youth and families living in high-risk environments and provides early intervention services and followup case management services for participants, as needed.

INTERVENTION TYPE

COMMUNITY-BASED

CONTENT FOCUS

ALCOHOL, ANTISOCIAL/AGGRESSIVE BEHAVIOR, ILLEGAL DRUGS, TOBACCO, VIOLENCE

This program targets general substance use and abuse.

Parents as a primary target population:

Each of the three program modules is delivered separately to children/youth and to their families. Optional parent-youth communications training is available.

INTERVENTIONS BY DOMAIN

INDIVIDUAL, FAMILY, PEER

INDIVIDUAL

- After-school alcohol, tobacco, and drug education/peer-led curricula
- · Life and social skills training

FAMILY

- · Parent education/parenting skills training
- Followup case management services to connect families to resources

PEER

• Peer-resistance education

KEY PROGRAM APPROACHES

INFORMATION SHARING, PARENT-CHILD INTERACTIONS, PARENT TRAINING, PROBLEM IDENTIFICATION AND REFERRAL, SKILL DEVELOPMENT

INFORMATION SHARING

The program provides information about substance use and abuse, the effects on health, and treatment options.

PARENT-CHILD INTERACTIONS

The program addresses family management, communication, and family interaction issues. Optional combined parent-youth training in communication allows youth and adults to come together to demonstrate and practice the skills they have already learned.

PARENT TRAINING

The program has three parent training modules that address substance use, personal and family responsibilities, and communication and refusal skills. The three parent modules focus on how to effectively influence youth regarding alcohol and drug issues through greater awareness of facts and feelings about alcohol and other drugs, as well as a greater understanding of intervention, referral procedures, and treatment options; enhancing parents' abilities to develop and implement expectations and consequences for their children in all areas of concern, including substance use; and establishing new and highly effective patterns of interaction among family members and with their children.

PROBLEM IDENTIFICATION AND REFERRAL

This program uses early intervention and case management services to connect families to community resources.

SKILL DEVELOPMENT

The program seeks to establish new and highly effective patterns of interaction among the program's youth, their family members, and peers that incorporate refusal skills, self-awareness, mutual respect, and violence avoidance.

HOW IT WORKS

Implementing the CLFC model involves—

- Purchasing CLFC materials and implementation training from the developer
- Identifying, recruiting, assessing, and selecting the community system(s) that will serve as the focal point of the program
- Creating, orienting, and training a small cadre of community volunteers to advocate for youth and their families in high-risk environments, and recruiting and helping retain those families in the program
- Recruiting youth and families in high-risk environments who are willing to participate in the program
- Administering six highly interactive training modules, three each to both parents and youth, separately (i.e., one module on substance use issues, a second on personal and family responsibilities, and a third on communication and refusal skills)
- Providing early intervention services and followup case management services to connect families to community resources and appropriate alternative activities when necessary

For a high-fidelity replication of CLFC, at least two part-time facilitators are needed for each of the parent and youth modules. After the recruitment phase, these four part-time facilitators can work with up to 30 families, 1 to 2 days per week, 3 to 4 hours each of those days, for the duration of the 15- to 18-session program. A minimum of two facilitators for each group is strongly recommended because a team approach significantly enhances the group learning experience and is likely to increase the participants' positive response to the program.

Facilitators may also be responsible for case management or referrals to community services (an optional element when used with universal populations).

Program startup takes 1 to 3 months, and includes—

- 5 to 10 days of training by the developer
- · Community mobilization activities
- · Identification and recruitment of parents and youth

Facilitators should provide 2.5-hour parent and youth training sessions for 15–18 sessions. However, the modules may be offered in 5–6 session increments throughout the year if families are unable to commit to 18 consecutive sessions.

OUTCOMES

IMPROVEMENTS IN POSITIVE ATTITUDES/BEHAVIORS, OTHER TYPES OF OUTCOMES

IMPROVEMENTS IN BEHAVIORS RELATED TO PROTECTIVE FACTORS

Improved parental knowledge of and beliefs about substance use

Increased parental involvement in setting rules about substance use

Increased youth involvement in setting rules related to substance use

Increased use of community services

Increased use of community services by youth when personal or family problems arose

Increased bonding by youth with mother, father, and siblings

Increased community involvement by youth under specific conditions

Improved family modeling of alcohol use in African American communities

The CLFC program evaluation found positive effects on family and youth resiliency and on substance use among youth 11 through 15 years of age

OTHER TYPES OF OUTCOMES

Delay in onset and reductions in substance use among youth who participated in the program were conditionally related to changes in family-level and youth-level resiliency factors targeted by the program.

The program increased community resiliency by empowering community volunteers to identify, recruit, and retain families.

In addition, the program improved family modeling of alcohol use in African American communities and moderated overall family alcohol use. Most important, the evaluation found that reductions in substance use among youth who participated in the program were conditionally related to changes in family-level and youth-level resiliency factors targeted by the program.

Benefits

CLFC is designed to—

- Improve refusal skills, resulting in both delayed onset and reduced use of substances by youth
- Increase communication and bonding between parents and children
- Foster greater use of community services in resolving family and personal problems
- Decrease uncontrolled behavior (i.e., reduce violence)

EVALUATION DESIGN

The CLFC program was evaluated rigorously using random assignment procedures, valid and reliable outcome measures, and multivariate analysis methods to uncover direct and conditional relationships between the program and outcomes.

DELIVERY SPECIFICATIONS

25-52 WEEKS

Amount of time required to deliver the program to obtain documented outcomes:

The program requires a start-up period of 1 to 3 months to obtain training, mobilize the community, and identify and recruit parents and youth.

The implementation of the program is intended to take place in 15 to 18 sessions. It can be delivered in 15 to 18 consecutive sessions or in three separate 5- to 6-session segments spread out over a year.

Each of the three parent and youth training modules lasts about 5 or 6 sessions with sessions lasting 2 to 2.5 hours for parents and 1 to 1.5 hours for youth. These sessions are often held simultaneously in separate rooms.

The optional parent and youth combined module requires two to three additional meetings, with each meeting lasting 2 to 2.5 hours.

The trainers may present the three separate modules in any order desired, but when implementing the modules with both parents and youth participants, it is important to pair the matching parent and youth modules.

Case management and referral activities are ongoing and are optional when used with universal populations.

INTENDED SETTING

RURAL, URBAN, SUBURBAN

This program was developed for rural, urban, and suburban settings.

FIDELITY

Components that must be included in order to achieve the same outcomes cited by the developer:

- A 1- to 3-month startup period is required to provide 5 to 10 days of training by the developer, mobilize the community, and identify and recruit parents and youth.
- Case management and referral services must be available for selective and indicated participants.
- The six modules should be delivered in their entirety or in combination with other community programs, depending on the community assessment of needs. A single module can be delivered if community assessment indicates it is appropriate.
- A community mobilization effort that targets a community already engaged in shared activities and social interaction.
- A selection process for participants that includes self-assessments and attendance at informational meetings.
- An intended population of youth between 9 and 17 years of age, preferably 12 to 15 years of age.

Optional components or strategies and how they were determined to be optional:

Distinct, stand-alone modules are optional. Communities and implementers can choose to implement one or more modules based on community assessment and needs.

Case management and referral services are optional for universal audiences.

Materials include an optional communications module for parents and youth together.

For a high-fidelity replication of CLFC, at least two part-time facilitators are needed for each of the parent and youth modules. After the recruitment phase, these four part-time facilitators can work with up to 30 families, providing 15–18 separate but often simultaneous sessions for both parents and youth. Two facilitators for each group is strongly recommended because a team approach significantly enhances the group learning experience and is likely to increase the participants' positive response to the program.

BARRIERS AND PROBLEMS

This program involves six separate curriculum modules (three for parents and three for youth). Many agencies work on one module per year for parents and its companion for youth. Other agencies work either only with the parent modules or only with the youth modules.

PERSONNEL

PART-TIME, PAID, VOLUNTEER

A Community Advocate Team of volunteers from the intended community should be established, consisting of 8 to 10 well-respected residents of the intended community, who are trained to assist in recruitment.

At least two part-time facilitators should be available for each of the parent and youth modules (a total of four if both sets of matching modules are presented). This provides a team approach that enhances group learning and increases positive responses to the program.

The four facilitators can work with up to 30 families/youth at each site (up to three sites at any one time).

Facilitators can expect to work 1 day per week, 4 hours a day, for the duration of the 15- to 18-session program at each site.

EDUCATION

NOT SPECIFIED BY THE DEVELOPER

PERSONNEL TRAINING

Type: SEMINAR/WORKSHOP, CLASSROOM, Location: ONSITE (user)/OFFSITE (regional)

To implement the entire program, facilitators should receive at least 5 days of training from the developer. Training addresses the CLFC community mobilization strategy and implementation of all six modules.

Training in the use of any individual module or any of the parent and youth companion pairs of modules can be provided in a 2- to 3-day seminar. This training can be provided regionally or on site. Contact the developer for details.

Typically, agencies desiring full replication have at least four part-time certified facilitators trained by the developer.

COST (estimated in U.S. dollars)

\$1,001-5,000

Cost considerations for implementing this Model Program as recommended by the developer:

Program costs should include personnel; materials; required training; and a discretionary fund for refreshments, incentive awards, and supplemental activities such as field trips at a level of \$60 per participant.

TRAINING

5-day training, per person	750
10-day training, per person	1,500

Potential trainers are encouraged to complete a readiness assessment to determine the extent of training they may need. Potential trainers who demonstrate adequate experience should attend the 5-day training course (\$750 per person, plus travel and per diem). Inexperienced potential trainers should attend the 10-day training course (\$1,500 per person, plus any necessary travel and per diem costs). Groups of five or more may inquire about scheduling private training sessions.

Customized onsite technical assistance and training are available at a cost of from \$400 to \$1,500 per day (plus travel and per diem), depending on the number of consultants needed and the total number of days requested at the site. Training is available in a variety of formats on any combination of CLFC modules desired. Limited technical assistance is available free. For more information about training, visit the COPES Web page http://www.copes.org/include/training.htm

MATERIALS

Information packet about the program, including four research articles
Complete curriculum package includes 6 trainer manuals, 25 participant workbooks per manual, 6 poster sets (one for each module), and a portfolio-sized carrying case for posters and a canvas carry bag for manuals, notebooks, etc. Available in English and Spanish
Quantity discount—orders of five or more
Individual training modules (manual, 25 sets of participant materials, and poster set)
Quantity discount—orders of five or more
Participant notebooks in sets of 25
Quantity discount—orders of five or more
Evaluation package—one each of Youth-Parent Survey, Construct Definitions and Psychometric Properties (can be implemented by the site or by the COPES evaluation team under a separate contract) \$300
Training assessment survey
(assists program director in assessing training needs)\$150
Fidelity instrument

Available products:

Free information packet about the program, including research articles.

Developing Positive Parental Influences Training Kit (manual, poster set, and 25 participant notebooks).

Developing Positive Parental Influences Participant Notebook (set of 25).

Raising Resilient Youth Training Kit (manual, poster set, and 20 participant handbooks).

Raising Resilient Youth Participant Notebook (set of 25).

Getting Real Training Manual for Adults and Youth (manual, poster set, and 25 participant notebooks).

Getting Real Training Participant Notebook (set of 25).

Developing Independence and Responsibility Training Manual and poster set.

Developing Independence and Responsibility Participant Notebook (set of 25).

Developing a Positive Response Training Manual and poster set.

Developing a Positive Response Participant Notebook (set of 25).

Evaluation Kit: Assessment of the validity and reliability of youth and parent surveys.

A Hispanic/Latino version is also available.

INTENDED AGE GROUP

CHILDHOOD (5-11), EARLY ADOLESCENT (12-14), TEENAGER (15-17)

This program was initially developed for youth 11 to 15 years of age but can be used with children and youth 9 to 17 years of age. The ideal population is youth 12 to 15 years of age.

INTENDED POPULATION

AFRICAN AMERICAN, ASIAN AMERICAN, AMERICAN INDIAN, HISPANIC/LATINO, NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER, WHITE

The program was initially delivered to primarily African American and White participants, but has been implemented with a variety of populations, including Hispanic/Latino, Asian American, and American Indian.

The Community Advocate Team is expected to teach, mentor, or otherwise instruct the program facilitators in gaining an understanding of the local cultural issues and provide a two-way bridge of understanding and acceptance between the participant population and the facilitator(s).

A Hispanic/Latino version is also available.

GENDER FOCUS

BOTH GENDERS

This program was developed for both male and female participants.

REPLICATIONS AND ADAPTATIONS

INTENDED SETTINGS

American Indian schools, Asian immigrant and Pacific Islander youth, Hispanic/Latino youth in community setting; detention center youth; churches; housing projects; etc.

PERSONNEL CAPACITY AND TRAINING

Typically agencies desiring full replication have at least four part-time certified facilitators trained by the developer.

RACIAL/ETHNIC COMPOSITION OF PARTICIPANTS

Asian American and Native Hawaiian and Other Pacific Islander, Hispanic/Latino, and American Indian

ADAPTATIONS OF THE MODEL PROGRAM

CONTACT INFORMATION

Duane Booker
Dallas Challenge
7777 Forrest Lane, Suite B–410
Dallas, TX 75230
(972) 566–4680

Mark Parrish
Archdiocese of Louisville
Maloney Center
1200 South Shelby Street
Louisville, KY 40203
(502) 636–1044

Linda Robinson
Discovery Counseling Center
115A Town and Country Drive
Danville, CA 94525
(925) 837–0505

Shelly Kernozicky Families First c/o 236 Dover Point Road Dover, NH 03820 (603) 749–4146

Martha Hauhuth
Positive Directions—The Center for Prevention & Recovery
420 Post Road West
Westport, CT 06880
(203) 772–7644

Shane Kelley Archways 919 NE 13th Street Fort Lauderdale, FL 33304 (954) 763–2030

CONTACT INFORMATION

ABOUT THE DEVELOPER

The developer is Ted N. Strader, M.S., executive director and founder of the Council on Prevention and Education.

FOR INFORMATION, CONTACT

Ted N. Strader or Teresa A. Boyd COPES, Inc. 845 Barret Avenue Louisville, KY 40204 Phone: (502) 583-6820

Fax: (502) 583-6832 E-mail: tstrader@sprynet.com Web site: http://www.copes.org/